PTO/SB/05 (01-04)

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UTILITY PATENT APPLICATION **TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

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	Attorney Docket No.	2003-0737.01				
	First Inventor	Timothy Darren Brown				
	Title	A Method of Establishing Target Device Settings Based on Source Device Settings				
	Express Mail Label No.	EU318640311US				

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450							
1. X Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27. 3. X Specification [Total Pages 22] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. X Drawing(s) (35 U.S.C. 113) [Total Sheets 1] 5. Oath or Declaration [Total Sheets 2] a. X Newly executed (original or copy) b. Copy from a prior application (37 CFR 1.63(d))	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. X Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) Attorney 11. English Translation Document (if applicable) 12. X Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations							
b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. Application Data Sheet. See 37 CFR 1.76	13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.							
	17. U Other:							
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.: Prior application information: Examiner For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.								
The incorporation can only be relied upon when a portion has been inadvert 19. CORRESPON	tently omitted from the submitted application parts. IDENCE ADDRESS							
X Customer Number: 21972	OR Correspondence address below							
Name								
Address								
City	State Zip Code							
	elephone Fax							
Name (Print/Type) Joseph Arrambide Registration No. (Attorney/Agent) 39,589 Signature Date 4-16/2004								

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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EEE TOANGMITTAL	Complete if Known			
FEE TRANSMITTAL	Application Number			
for FY 2004	Filing Date			
Effective 10/01/2003. Patent fees are subject to annual revision.	First Named Inventor	Timothy Darren Brown		
· · · · · · · · · · · · · · · · · · ·	Examiner Name			
Applicant claims small entity status. See 37 CFR 1.27	Art Unit			
TOTAL AMOUNT OF PAYMENT (\$) 1,044.00	Attorney Docket No.	2003-0737.01		

		Alloniey Docker No. 2003 0737101							
METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)					
Check	Credit card	Money Oth	er None	3. ADDITIONAL FEES					
X Denosit	Account:	— Older —					Entity		
Deposit	, totobini:			Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
Account Number		12-1213		1051	130	2051	1.,	Surcharge - late filing fee or oath	
Deposit Account	Lexma	ark International,	Inc.	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
Name The Director i	s authorized to	: (check all that apply)	_	1053	130	1053	130	Non-English specification	<u> </u>
	e(s) indicated be	``	verpayments	1812	2,520	1812	2,520	For filing a request for ex parte reexamination	ļ. — I.
		s) or any underpayment or	f fee(s)	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.				1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
to the above-to				1251	110	2251	55	Extension for reply within first month	
4 54010 5		ALCULATION		1252	420	2252	210	Extension for reply within second month	
1. BASIC F Large Entity				1253	950	2253	475	Extension for reply within third month	
Fee Fee	Fee Fee	Fee Description	Fee Paid	1254	1,480	2254	740	Extension for reply within fourth month	
Code (\$) 1001 770	Code (\$) 2001 385	Utility filing fee		1255	2,010	2255	1,005	Extension for reply within fifth month	
1001 770	2002 170	Design filing fee	770.00	1401	330	2401	165	Notice of Appeal	
1003 530	2003 265	Plant filing fee		1402	330	2402	165	Filing brief in support of an appeal	
1004 770	2004 385	Reissue filing fee		1403	290	2403	145	Request for oral hearing	
1005 160	2005 80	Provisional filing fee		1451	1,510	1451	1,510	Petition to institute a public use proceeding	
	s	SUBTOTAL (1) (\$)	770.00	1452	110	2452	55	Petition to revive - unavoidable	
			1453	1,330	2453	665	Petition to revive - unintentional		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE			1501	1,330	2501	665	Utility issue fee (or reissue)		
Total Claims	[22]	Extra Claims below		1502	480	2502	240	Design issue fee	·
Total Claims Independent	33 -20*] <u>= 234</u>]	1503	640	2503		Plant issue fee	
Claims	3 - 3*	*= [0]	1 <u>1 </u>	1460	130	1460	130	Petitions to the Commissioner	
Multiple Dependent =			1807	50	1807	50	Processing fee under 37 CFR 1.17(q)		
Large Entity Fee Fee	Fee Fee	Fee Description		1806	180	1806		Submission of Information Disclosure Stmt	
Code (\$)	Code (\$)			8021	40	8021	40	Recording each patent assignment per property (times number of properties)	40.00
1202 18 1201 86	2202 9 2201 43	Claims in excess of 20 Independent claims in		1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))	
1201 86	2201 43	Multiple dependent cla		1810	770	2810	385	For each additional invention to be	
1204 86	2204 43	** Reissue independer	•					examined (37 CFR 1.129(b))	
4005 40	0005 0	over original patent	veges of 20	1801 1802	770 900	2801 1802		Request for Continued Examination (RCE) Request for expedited examination	
1205 18	2205 9	** Reissue claims in ex and over original par				l	300	of a design application	
SUBTOTAL (2) (\$) 234.00					fee (sp				
**or number previously paid, if greater; For Reissues, see above *Redu						Basic	Filing F	ee Paid SUBTOTAL (3) (\$)	40.00
SUBMITTED BY (Complete (if applicable)									

SUBMITTED BY

Name (Print/Type)

Joseph C. Arrambide

Registration No. (Attorney/Agent)

Signature

(Complete (if applicable)

Telephone 859-232-3495

Date 4-16-2304

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